

JAN 18 2007**FAX TRANSMISSION****DATE:** January 18, 2007**PTO IDENTIFIER:** Application Number 10/717,434-Conf. #7002
Patent Number**Inventor:** Charlotte A. Thru et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** EDWARDS ANGELL PALMER & DODGE LLP
Christine C. O'Day**PHONE:** (617) 439-4444**Attorney Dkt. #:** 58404(50533)**PAGES (Including Cover Sheet):** 20**CONTENTS:** Transmittal (1 page)
Fee Transmittal (1 page)
Amendment (16 pages)
Request for Continued Examination Transmittal (1 page)
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PTO/SB/97 (09-04)

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Application No. (if known): 10/717,434

Attorney Docket No.: 58404(50533)

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<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>		Application Number	10/717,434-Conf. #7002
		Filing Date	November 18, 2003
		First Named Inventor	Charlotte A. Thru
		Art Unit	1635
		Examiner Name	T. A. Vivemore
Total Number of Pages in This Submission		Attorney Docket Number	58404(50533)

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Continued Examination
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP	
Signature		
Printed name	Christine O'Day Colleen McKiernan	
Date	January 18, 2007	Reg. No. 38,256 48,570

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PTO/SB/21 (09-06)

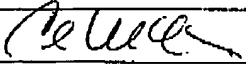
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/717,434-Conf. #7002
	Filing Date	November 18, 2003
	First Named Inventor	Charlotte A. Thru
	Art Unit	1635
	Examiner Name	T. A. Vivimore
Total Number of Pages in This Submission	Attorney Docket Number	58404(50533)

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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	Christine O'Day Colleen McKiernan		
Date	January 18, 2007	Reg. No.	38,256 48,570

PTO/SB/17 (01-06)
OMB 0651-0032U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL For FY 2006 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Complete if Known	
		Application Number	10/717,434
		Filing Date	November 18, 2003
		First Named Inventor	Charlotte A. Thru
		Examiner Name	T.A. Vivimore
		Art Unit	1635
TOTAL AMOUNT OF PAYMENT		(\$)	790.00
		Attorney Docket No.	58404(50533)

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<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>04-1105</u> Deposit Account Name: <u>Edwards Angell Palmer & Dodge LLP</u>
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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description	Fee (\$)	Small Entity Fee (\$)					
Each claim over 20 (including Reissues)	50	25					
Each independent claim over 3 (including Reissues)	200	100					
Multiple dependent claims	360	180					
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
39	41	0		Fee (\$)	Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
1	3	0					
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
	- 100 =	/50	(round up to a whole number) x				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge):							
1801 Request for Continued Examination 790.00							

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	38,256 48,570
Name (Print/Type)	Christine O'Day Colleen McKiernan	Telephone	(617) 439-4444
		Date	January 18, 2007

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